Pam Hintz 651.621.8535 - Direct PHintz@otcpas.com



Depend on Our People. Count on Our Advice.<sup>SM</sup>

June 15, 2017

Marlene H. Dortch Secretary Federal Communications Commission 445 12th Street, S.W. Washington, DC 20554

ATTENTION: WIRELINE COMPETION BUREAU

RE: Form 481 ETC filing pursuant to Sections 54.313 and 54.422 SAC 330889, WI, Hager Telecom, Inc. Connect America Fund WC Dockets 10-90, 11-42 and 14-58

Dear Secretary Dortch:

Pursuant to Sections 54.313 and 54.422 of the Commission's Rules, please accept the attached FCC Form 481 of Hager Telecom, Inc., WI, SAC 330889 (the "Company") for filing with the Commission.

The Company is filing the attached redacted version via ECFS.

Kindly direct any questions regarding this transmittal to the undersigned. Thank you.

Sincerely,

Pamela Hintz

Senior Telecommunications Consultant phintz@otcpas.com

(651) 621-8535

**Enclosures** 

# FCC Form 481 - Carrier Arms FLOAGTED - FOR PUBLIC INSPERIOR S6/OMB Control No. 3060-0819 Data Collection Form

<010>	Study Area Code	330889
<015>	Study Area Name	HAGER TELECOM INC.
<020>	Program Year	2018
<030>	Contact Name: Person USAC should contact with questions about this data	PAMELA HINTZ
<035>	Contact Telephone Number: Number of the person identified in data line <030>	6516218535 ext.
<039>	Contact Email Address: Email of the person identified in data line <030>	phintz@otcpas.com
	Form Type	54.313 and 54.422

(200) Service Outage Reporting (Voice)	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

	ection Form	eporting (void							OM	1B Control No. 3060 2013	-0986/OMB Control N	o. 3060-0819
<010>	Study Area Co	ode				330889						
<015>	Study Area Na	ame				HAGER TELEC	OM INC.					
<020>	Program Year					2018						
<030>	Contact Name	e - Person USAC	Should contac	t regarding this	s data	PAMELA HINT						
<035>	Contact Telep	hone Number	- Number of pe	rson identified	in data line <0	30> 6516218535	ext.					
<039>	Contact Email	Address - Ema	il Address of pe	erson identified	l in data line <0	30> phintz@otcp	eas.com					
<210>	For the prior	r calendar yea	ar, were there	any reportal	ole voice serv	ice outages?	No					
<220>	<a></a>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<c1></c1>	<c2></c2>	<d></d>	<e></e>	<f></f>	<g></g>	<h></h>
	NORS Reference Number	Outage Start Date	Outage Start Time	Outage End Date	Outage End Time	Number of Customers Affected	Total Number of Customers	911 Facilities Affected (Yes / No)	Service Outage Description (Check all that apply)	Did This Outage Affect Multiple Study Areas (Yes / No)	Service Outage Resolution	Preventative Procedures

(300) Unfulfilled Service Request Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010> Study Area Code	330889	
<015> Study Area Name	HAGER TELECOM INC.	
<020> Program Year	2018	
<030> Contact Name - Person USAC should contact regarding this	data PAMELA HINTZ	
<035> Contact Telephone Number - Number of person identified i	n data line <030> 6516218535 ext.	
<039> Contact Email Address - Email Address of person identified	in data line <030> phintz@otcpas.com	
<300> Unfulfilled service request (voice)	0	
<310> Detail on attempts (voice)		
	Name of Attached Document	
<320> Unfulfilled service request (broadband)	0	
<330> Detail on attempts (broadband)		
	Name of Attached Document	

(400) Number of Complaints per 1,000 customers	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code 330889	
<015>	Study Area Name  HAGER TELECOM INC.	
<020>	> Program Year	
<030>	Contact Name - Person USAC should contact regarding this	s data pamela Hintz
<035>	Contact Telephone Number - Number of person identified <030>	in data line 6516218535 ext.
<039>	Contact Email Address - Email Address of person identified <030>	in data line phintz@otcpas.com
<400>	Select from the drop-down list to indicate how you would ly voice complaints (zero or greater) for voice telephony serv calendar year for each service area in which you are design any facilities you own, operate, lease, or otherwise utilize.	ce in the prior Offered only fixed voice
<410>	Complaints per 1000 customers for fixed voice	0.0
<420>	Complaints per 1000 customers for mobile voice	
<430>	Select from the drop-down list to indicate how you would end-user customer complaints (zero or greater) for broads the prior calendar year for each service area in which you an ETC for any facilities you own, operate, lease, or otherw	and service in Offered only fixed broadband are designated
<440>	Complaints per 1000 customers for fixed broadband	0.0
<450>	Complaints per 1000 customers for mobile broadband	

, ,	npliance With Service Quality Standards and Consumer Protection Rules ection Form		FCC Form 481  OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	330889	
<015>	Study Area Name	HAGER TELECOM INC.	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	PAMELA HINTZ	
<035>	Contact Telephone Number - Number of person identified in data line <030>	6516218535 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	phintz@otcpas.com	
<500>	Certify compliance with applicable service quality standards and consumer pr	otection rules Yes	
		330889WI510.pdf	
<510>	Descriptive document for Service Quality Standards & Consumer Protection Re	ules Compliance	
<515>	Certify compliance with applicable minimum service standards		

# (600) Functionality in Emergency Sit Rate DACTED - FOR PUBLIC INSECTION

Data Collection FormOMB Control No. 3060-0986/OMB Control No. 3060-0819July 2013

<010>	Study Area Code	330889
<015>	Study Area Name	HAGER TELECOM INC.
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	PAMELA HINTZ
<035>	Contact Telephone Number - Number of person identified in data line <030>	6516218535 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	phintz@otcpas.com
<600>	Certify compliance regarding ability to function in emergency situations	Yes
<610>	Descriptive document for Functionality in Emergency Situations	330889WI610.pdf

(700) Price Offerings including Voice Rate Data  Data Collection Form		FCC Form 481  OMB Control No. 3060-0986/OMB Control No. 3060-0819  July 2013
<010> Study Area Code	330889	
<015> Study Area Name	HAGER TELECOM INC.	
<020> Program Year	2018	
<030> Contact Name - Person USAC should contact regarding this data	PAMELA HINTZ	
<035> Contact Telephone Number - Number of person identified in da	ata line <030> 6516218535 ext.	
<039> Contact Email Address - Email Address of person identified in de	ata line <030> phintz@otcpas.com	
<701> Residential Local Service Charge Effective Date <702> Single State-wide Residential Local Service Charge	017	

<703>	<a1></a1>	<a2></a2>	<a3></a3>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<b5></b5>	<c></c>
					Residential Local			Mandatory Extended Area	
-	State	Exchange (ILEC)	SAC (CETC)	Rate Type	Service Rate	State Subscriber Line Charge	State Universal Service Fee	Service Charge	Total per line Rates and Fees
-									
_									
-									
•									
-									
-									
•					2				
-					See at	tached worksheet			
-									
-									
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<u>_</u>									

Page 8

(710) Broadbrand Price Offerings	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	30889
<015>	Study Area Name	HAGER TELECOM INC.
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	PAMELA HINTZ
<035>	Contact Telephone Number - Number of person identified in data line <030>	6516218535 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	phintz@otcpas.com

<711>	<a1></a1>	<a2></a2>	<b1></b1>	<b2></b2>	<c></c>	<d1></d1>	<d2></d2>	<d3></d3>	<d4></d4>
	State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rate and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service - Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached {select }
				- See attacl	and				
					<del>ieu</del>				
			,	<del>worksheet</del>					

(800) Op	erating Companies			FCC Form 481
Data Col	lection Form			OMB Control No. 3060-0986/OMB Control No. 3060-0819
				July 2013
<010>	Study Area Code		330889	
<015>	Study Area Name		HAGER TELECOM INC.	
<020>	Program Year		2018	
<030>	Contact Name - Person L	JSAC should contact regarding this data	PAMELA HINTZ	
<035>	Contact Telephone Num	ber - Number of person identified in data line <030>	6516218535 ext.	
<039>	Contact Email Address -	Email Address of person identified in data line <030>	phintz@otcpas.com	
<810>	Reporting Carrier	Hager Telecom Incorporated		
<811>	Holding Company	Rural Communications Holding Corporation		
<812>	Operating Company	Hager Telecom Incorporated		

<813>	<a1></a1>	<a2></a2>	<a3></a3>
	Affiliates	SAC	Doing Business As Company or Brand Designation
•			
			-
	See atta	ached workshe	et
•			
,			
			-
•			
,			
•			
•			
•			
•			

(900) Tri	100) Tribal Lands Reporting FCC Form 481			
Data Col	lection Form		36/OMB Control No. 3060-0819	
		July 2013		
<010>	Study Area Code	330889		
<015>	Study Area Name	HAGER TELECOM INC.		
<020>	Program Year	2018		
<030>	Contact Name - Person USAC should contact regarding this data	PAMELA HINTZ		
<035>	Contact Telephone Number - Number of person identified in data line <030>	6516218535 ext.		
<039>	Contact Email Address - Email Address of person identified in data line <030>	phintz@otcpas.com		
<900>	Does the filing entity offer tribal land services? (Y/N)	No		
<910>	Tribal Land(s) on which ETC Serves			
<920>	Tribal Government Engagement Obligation	Name of Attached Document		
If your o	ompany serves Tribal lands, please select (Yes,No, NA) for each these boxes			
-	rm the status described on the attached PDF, on line 920,			
	trates coordination with the Tribal government pursuant to	Select		
	B(a)(9) includes:	Yes or No or Not Applicable		
<921> <922>	Needs assessment and deployment planning with a focus on Tribal community anchor institutions.  Feasibility and sustainability planning;			
<923>	Marketing services in a culturally sensitive manner;			
<924>	Compliance with Rights of way processes			
<925>	Compliance with Land Use permitting requirements			
<926>	Compliance with Facilities Siting rules			
<927>	Compliance with Environmental Review processes			
<928>	Compliance with Cultural Preservation review processes			
<929>	Compliance with Tribal Business and Licensing requirements.			
~J_J/	Compliance with fribal business and Licensing requirements.			

(1000) Voice and Broadband Service Rate Comparability	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

Data con			July 2013
<010>	Study Area Code		330889
<015>	Study Area Name		HAGER TELECOM INC.
<020>	Program Year		2018
<030>	Contact Name - Person USAC should contact regarding this data		PAMELA HINTZ
<035>	Contact Telephone Number - Number of person identified in data line <	030>	6516218535 ext.
<039>	Contact Email Address - Email Address of person identified in data line <	<030>	phintz@otcpas.com
<1000>	Voice services rate comparability certification	Yes	
<1010>	Attach detailed description for voice services rate comparability compliance	33088	39WI1010.pdf
			Name of Attached Document
<1020>	Broadband comparability certification		- Pricing is no more than the most recent applicable benchmark announced by Wireline Competition Bureau
<1030>	Attach detailed description for broadband comparability compliance	33088	9WI1030.pdf
			Name of Attached Document

	o Terrestrial Backhaul Reporting llection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060 July 2013	)-0819
<010>	Study Area Code	330889	
<015>	Study Area Name	HAGER TELECOM INC.	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	PAMELA HINTZ	
<035>	Contact Telephone Number - Number of person identified in data line <030>	6516218535 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	phintz@otcpas.com	
<1100>	Certify whether terrestrial backhaul options exist (Y/N)	Yes	
<1130>	Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 upstream within the supported area pursuant to § 54.313(g).	kbps	

Lifeline	erms and Condition for Lifeline Customers ection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
ر د ۱۵۱۵۰	Study Area Coda	
<010>	Study Area Code	330889
<015> <020>	Study Area Name Program Year	HAGER TELECOM INC.
<020>	Contact Name - Person USAC should contact regarding this data	2018
<035>	Contact Telephone Number - Number of person identified in data line <030>	PAMELA HINTZ
<039>	Contact Telephone Number - Number of person identified in data line <030>	6516218535 ext.
<u> </u>	Contact Linan Address - Linan Address of person identified in data fine Cosoz	phintz@otcpas.com
		330889WI1210.pdf
<1210>	Terms & Conditions of Voice Telephony Lifeline Plans	
	·	Name of Attached Document
<1220>	Link to Public Website HTTP	
or the we	heck these boxes below to confirm that the attached document(s), on line 1210, ebsite listed, on line 1220, contains the required information pursuant to (a)(2) annual reporting for ETCs receiving low-income support, carriers must report:	
<1221>	Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers,	
<1222>	Details on the number of minutes provided as part of the plan,	
<1223>	Additional charges for toll calls, and rates for each such plan.	

(2005) Pi	rice Cap Carrier Additional Documentation		FCC Form 481
Data Col	lection Form		OMB Control No. 3060-0986/OMB Control No. 3060-0819
Including	Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers		July 2013
<010>	Study Area Code	330889	
<015>	Study Area Name	HAGER TELECOM INC.	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	PAMELA HINTZ	
<035>	Contact Telephone Number - Number of person identified in data line <030>	6516218535 ext.	
<039> Contact Email Address - Email Address of person identified in data line <030>		phintz@otcpas.com	

Select the appropriate responses below (Yes, No, Not Applicable) to note compliance as a recipient of Incremental High Cost support, High Cost support to offset access charge reductions, and Connect America Phase II support as set forth in 47 CFR § 54.313(b),(c),(d),(e). The information reported on this form and in the documents attached below is accurate.

### **Incremental Connect America Phase I reporting**

<2011>	3rd Year Certification 47 CFR §54.313(b)(1)(ii) - Note that for the July 2017 certification, this applies to Round 2 recipients of Incremental Support.	
<2022>	Recipient certifies, representing year three after filing a notice of acceptance of funding pursuant to 54.312(c), that the locations in	
	question are not receiving support under the Broadband Initiatives Program or the Broadband Technology Opportunities Program for projects that will provide broadband with speeds of at least 4 Mbps/1Mbps - 54.313(b)(2)(i). Round 2 recipients only.	
<2023>	The attachment on line 2024 includes a statement of the total amount of capital funding expended in the previous year in meeting Connect	
	America Phase I deployment obligations, accompanied by a list of census blocks indicating where funding was spent. This covers	
	year three - 54.313(b)(2)(ii). Round 2 recipients only.	
<2024A>	Round 2 Recipient of Incremental Support?	
<2024B>	Attach list of census blocks indicating where funding was spent in year three - 54.313(b)(2)(ii). Round 2 recipients only.	Name of Attached Document Listing Required Information
<2025A>	Round 2 Recipient of Incremental Support?	
<2025B>	Attach geocoded Information for Phase I milestone reports (Round 2 for year three) - Connect America Fund , WC Docket 10-90, Report and Order, FCC 13-73, paragraph 35 (May 22, 2013).	Name of Attached Document Listing Required Information
<2015>	2016 and future Frozen Support Certification 47 CFR § 54.313(c)(4)	

(2005) Price Cap	Carrier Additional Documentation	FCC Form 481		
Data Collection F	Form		. 3060-0986/OMB Control No. 3060-0819	
Including Rate-of	f-Return Carriers affiliated with Price Cap Local Exchange Carriers	July 2013		
Price Ca	p Carrier Connect America ICC Support {47 CFR § 54.313(d)}			
<2016>	Certification support used to build broadband			
Connect	America Phase II Reporting {47 CFR § 54.313(e)}			
<2017A>	Connect America Fund Phase II recipient?			
<2017C>	Total amount of Phase II support, if any, the price cap carrier used for capital expenditures in 2016.			
<2018>	Attach the number, names, and addresses of community anchor institutions to which the carrier newly began providing access to broadband service in the preceding calendar year - 54.313(e)(1)(ii)(A)	Name of Attached Document Listing Required Information		
<2019>	Recipient certifies that it bid on category one telecommunications and Internet access services in response to all FCC Form 470 postings seeking broadband service that meets the connectivity targets for the schools and libraries universal service support program for eligible schools and libraries located within any area in a census block where the carrier is receiving Phase II model-based support, and that such bids were at rates reasonably comparable to rates charged to eligible schools and libraries in urban areas for comparable offerings - 54.313(e)(1)(ii)(C)			

(3005) Rate Of Return Carrier Additional Documentation

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	330889
<015>	Study Area Name	HAGER TELECOM INC.
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	PAMELA HINTZ
<035>	Contact Telephone Number - Number of person identified in data line <030>	6516218535 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	phintz@otcpas.com

Select from the drop down menu or check the boxes below to note compliance with 54.313(f)(1). Privately held carriers must ensure compliance with the financial reporting requirements set forth in 47 CFR 54.313(f)(2). I further certify that the information reported on this form and in the documents attached below is accurate.

(3009)	Progress Report on 5 Year Plan Carrier certifies to 54.313(f)(1)(iii)			
(3003)	Carrier certifies to 54.515(1)(1)(1)	Vec -	Attach Certificat:	±
(3010A)	Certification of Public Interest Obligations {47 CFR § 54.313(f)(1)(i)}	168 -		330889WI3010.pdf
(3010B)	Please Provide Attachment	Name of Attached Document Information	t Listing Required	
(3012A)	Community Anchor Institutions {47 CFR § 54.313(f)(1)(ii)}	No - No New Community Anch	ors -	
(3012B)	Please Provide Attachment	Name of Attached Document Information	t Listing Required	
(3013)	Is your company a Privately Held ROR Carrier {47 CFR § 54.313(f)(2)}	(Yes/No)	•	
(3014)	If yes, does your company file the RUS annual report	(Yes/No)	) •	
(3015)	Please check these boxes to confirm that the attached PDF, on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires: Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers)			
(3016)	Document(s) with Balance Sheet, Income Statement and Statement of Cash Flows			
(3017)	If the response is yes on line 3014, attach your company's RUS annual report and all required	Name of Attached Document Information	t Listing Required	
(3018)	documentation If the response is no on line 3014, is your company audited? If the response is yes on line 3018, please check the boxes below to confirm your submission on line 3026 pursuant to § 54.313(f)(2), contains: Either a copy of their audited financial statement; or	(Yes/No)		
(3020)	(2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows		V	
(3021)	Management letter and/or audit opinion issued by the independent certified public accountant that performed the company's financial audit. If the response is no on line 3018, please check the boxes below to confirm your submission on line 3026 pursuant to § 54.313(f)(2), contains:		V	
(3022)	Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers			
(3023)	Underlying information subjected to a review by an independent certified public accountant			
(3024)	Underlying information subjected to an officer certification.			
(3025)	Document(s) with Balance Sheet, Income Statement and Statement of Cash Flows			
(3026)	Attach the worksheet listing required information	Name of Attached Document Information	t Listing Required	330889WI3026.pdf

,	
(3005) Rate Of Return Carrier Additional Documentation (Continued)	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	330889
<015>	Study Area Name	HAGER TELECOM INC.
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	PAMELA HINTZ
<035>	Contact Telephone Number - Number of person identified in data line <030>	6516218535 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	phintz@otcpas.com
	·	

Financial Data Summary	1
(3027) Revenue	ļ
(3028) Operating Expenses	Į
(3029) Net Income	l
(3030) Telephone Plant In Service(TPIS)	
(3031) Total Assets	ĺ
(3032) Total Debt	Ì
(3033) Total Equity	İ
(3034) Dividends	ļ
	- 1

(4005) Rural Broadband Experiment Additional Documentation **Data Collection Form** 

FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013

<010>	Study Area Code	330889
<015>	Study Area Name	HAGER TELECOM INC.
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	PAMELA HINTZ
<035>	Contact Telephone Number - Number of person identified in data li	ne <030> 6516218535 ext.
<039>	Contact Email Address - Email Address of person identified in data li	ne <030> phintz@otcpas.com

### 4005 Rural Broadband Experiment

Authorized Rural Broadband Experiment (RBE) recipients must address the certification for public interest obligations, provide a list of newly served community anchor institutions, and provide a list of locations where broadband has been deployed.

### Public Interest Obligations – FCC 14-98 (paragraphs 26-29, 78)

Please address Line 4001 regarding compliance with the Commission's public interest obligations. All RBE participants must provide a response to Line 4001.

**4001**. Recipient certifies that it is offering broadband to the identified locations meeting the requisite public interest obligations consistent with the category for which they were selected, including broadband speed, latency, usage capacity, and rates that are reasonably comparable to rates for comparable offerings in urban areas?

### Community Anchor Institutions – FCC 14-98 (paragraph 79)

4003a. RBE participants must provide the number, names, and addresses of community anchor institutions to which they newly deployed broadband service in the preceding calendar year. On this line, please respond (yes – attach new community anchors, no – no new anchors) to indicate whether this list will be provided.

speed and data usage allowances available in the

relevant geographic area.

If yes to 4003A, please provide a response for 4003B.				
<b>4003b</b> . Provide the number, names and addresses of community anchor institutions to which the recipient newly began providing access to broadband service in the preceding calendar year.	Name of Attached Document Listing Required Information			
Broadband Deployment Locations – FCC 14-98 (par	agraph 80)			
<b>4004a</b> . Attach a list of geocoded locations to which broadband has been deployed as of the June 1st immediately preceding the July 1st filing deadline for the FCC Form 481.	Name of Attached Document Listing Required Information			
<b>4004b</b> . Attach evidence demonstrating that the recipient is meeting the relevant public service obligations for the identified locations. Materials must at least detail the pricing, offered broadband	Name of Attached Document Listing Required Information			

Certification - Reporting Carrier  Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-081 July 2013	
<010>	Study Area Code	330889	
<015>	Study Area Name	HAGER TELECOM INC.	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	PAMELA HINTZ	
<035>	Contact Telephone Number - Number of person identified in data line <030>	6516218535 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	phintz@otcpas.com	

### TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

Certification of Officer as to	the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients
	sponsibilities include ensuring the accuracy of the annual reporting requirements for universal service support ion reported on this form and in any attachments is accurate.
Name of Reporting Carrier:	
Signature of Authorized Officer:	Date
Printed name of Authorized Officer:	
Title or position of Authorized Officer:	
Telephone number of Authorized Officer:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:
Persons willfully making false statements on this form ca	an be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

Certification - Agent / Carrier Data Collection Form			FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	330889	
<015>	Study Area Name	HAGER TELECOM INC.	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	PAMELA HINTZ	
<035>	Contact Telephone Number - Number of person identified in data line <030>	6516218535 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	phintz@otcpas.com	

### TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

Certification of Officer to Authorize an Agent to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier  I certify that (Name of Agent) Olsen Thielen is authorized to submit the information reported on behalf of the reporting carrier. I also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.				
Name of Reporting Carrier: HAGER TELECOM INC.				
Signature of Authorized Officer: CERTIFIED ONLINE	Date: 06/13/2017			
Printed name of Authorized Officer: William Eckles				
Title or position of Authorized Officer: President				
Telephone number of Authorized Officer: 5075263252 ext.				
Study Area Code of Reporting Carrier: 330889	Filing Due Date for this form: 07/03/2017			
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.				

### TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier				
i, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service support recipients o the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reportec				
Name of Reporting Carrier: HAGER TELECOM INC.				
Name of Authorized Agent Firm: Olsen Thielen				
Signature of Authorized Agent or Employee of Agent: CERTIFIED ONLINE	Date:	06/07/2017		
Name of Authorized Agent Employee: Olsen Thielen				
Title or position of Authorized Agent or Employee of Agent Consultant				
Telephone number of Authorized Agent or Employee of Agent: 6516218511 ext.				
Study Area Code of Reporting Carrier: 330889 Filing Due Date for this form: 07/03/2017				
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S. 18 of the United States Code, 18 U.S.C. § 1001.	C. §§ 502, 503(b), o	r fine or imprisonment under Title		

Attachments

(700) Pri	ce Offerings including Voice Rate Data	FCC Form 481	
Data Collection Form			OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	330889	
<015>	Study Area Name	HAGER TELECOM INC.	
<020×	Drogram Voor	2010	·

PAMELA HINTZ

6516218535 ext.

phintz@otcpas.com

<701> Residential Local Service Charge Effective Date

1/1/2017

Single State-wide Residential Local Service Charge

Contact Telephone Number - Number of person identified in data line <030>

Contact Email Address - Email Address of person identified in data line <030>

Contact Name - Person USAC should contact regarding this data

<703>

<030>

<a1></a1>	<a2></a2>	<a3></a3>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<b5></b5>	<c></c>
\u1>	\u2>	\u3>	1012	Residential Local	1037	\U+/	Mandatory Extended Area	
State	Exchange (ILEC)	SAC (CETC)	Rate Type	Service Rate	State Subscriber Line Charge	State Universal Service Fee	Service Charge	Total per line Rates and Fees
WI	All		FR	22.75	0.0	0.75	0.0	23.5

(710) Broadband Price Offerings	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	330889
<015>	Study Area Name	HAGER TELECOM INC.
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	PAMELA HINTZ
<035>	Contact Telephone Number - Number of person identified in data line <030>	6516218535 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	phintz@otcpas.com

> <a< th=""><th>1&gt;</th><th><a2></a2></th><th><b1></b1></th><th><b2></b2></th><th><c> <d1></d1></c></th><th><d2></d2></th><th>&gt; <d3></d3></th><th></th><th><d4></d4></th></a<>	1>	<a2></a2>	<b1></b1>	<b2></b2>	<c> <d1></d1></c>	<d2></d2>	> <d3></d3>		<d4></d4>
Sta	ate	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rates and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service -Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached {select}
WI		All	39.95	0.0	39.95	4.0	1.0	999999.0	Other, No limit on usage allowance
WI		All	49.95	0.0	49.95	8.0	1.0	999999.0	Other, No limit on usage allowance
WI		All	59.95	0.0	59.95	15.0	1.0	999999.0	Other, No limit on usage allowance
WI		All	69.95	0.0	69.95	25.0	6.0	999999.0	Other, No limit on usage allowance
WI		All	9.95	0.0	9.95	4.0	1.0	999999.0	Other, No limit on usage allowance
WI		All	39.95	0.0	39.95	30.0	10.0	999999.0	Other, No limit on usage allowance
WI		All	49.95	0.0	49.95	60.0	20.0	999999.0	Other, No limit on usage allowance
WI		All	59.95	0.0	59.95	90.0	30.0	999999.0	Other, No limit on usage allowance
WI		All	139.95	0.0	139.95	1000.0	50.0	999999.0	Other, No limit on usage allowance

(800) Op	erating Companies			FCC Form 481
Data Col	ection Form			OMB Control No. 3060-0986/OMB Control No. 3060-0819
				July 2013
•				
<010>	Study Area Code		330889	
<015>	Study Area Name		HAGER TELECOM INC.	
<020>	Program Year		2018	
<030>	Contact Name - Person U	SAC should contact regarding this data	PAMELA HINTZ	
<035>	Contact Telephone Numb	er - Number of person identified in data line <030>	6516218535 ext.	
<039>	Contact Email Address - E	mail Address of person identified in data line <030>	phintz@otcpas.com	
<810>	Reporting Carrier	Hager Telecom Incorporated		
<811>	Holding Company	Rural Communications Holding Corporation		
<812>	Operating Company	Hager Telecom Incorporated		

813>	<a1></a1>	<a2></a2>	<a3></a3>
	Affiliates	SAC	Doing Business As Company or Brand Designation
·	Blue Earth Valley Telephone Company	361358	BEVCOMM
	Eckles Telephone Company	361386	BEVCOMM
	Easton Telephone Company	361384	BEVCOMM
	Cannon Valley Telecom, Inc.	361440	BEVCOMM
· <u> </u>	BEVCOMM, Inc.		BEVCOMM
	Indianhead Telephone Company	330936	BEVCOMM
	Pine Island Telephone Company	361454	BEVCOMM
	Hager Telecom Incorporated	330889	BEVCOMM
	Granada Telephone Company	361399	BEVCOMM

Page 1 of 1

SAC: 330889 State: Wisconsin Hager Telecom Inc

Form 481 Line No.: 510 Compliance with Service Quality Standards and Consumer Protection

As required by the Wisconsin Public Service Commission (PSC) Chapter 165 Rules, the local services provided by Hager Telecom Inc are provided under internal company operating procedures and publicly available tariffs which are in compliance with applicable Wisconsin PSC orders and rules including:

## WI Chapter PSC 165 STANDARDS FOR TELECOMMUNICATIONS SERVICE

165.010	General.	165.067	Interference with public service
165.020	Definitions.		structures.
165.031	Retention of records.	165.070	Provision for testing.
165.032	Schedules to be filed with the	165.071	Meter and recording equipment test
	commission.		facilities.
165.033	Exchange area boundaries.	165.072	Accuracy requirements.
165.034	Utility accidents and interruptions.	165.073	Initial test.
165.040	Meter reading records.	165.074	As-found tests.
165.041	Meter reading interval.	165.075	Routine tests.
165.042	Billing recording equipment.	165.076	Request tests.
165.043	Information available to customers.	165.077	Referee tests.
165.050	Customer billing.	165.078	Test records.
165.051	Deposits.	165.082	Traffic and operator rules.
165.052	Disconnection and refusal of service.	165.083	Answering time objectives.
165.0525	Deferred payment agreement.	165.084	Dial service objectives.
165.053	Customer complaints.	165.085	Interoffice trunks.
165.0535	Dispute procedures.	165.086	Transmission requirements.
165.054	Held applications.	165.087	Minimum transmission objectives.
165.055	Directories.	165.088	Public telephone service.
165.060	Construction.	165.089	Interruptions of service.
165.061	Maintenance of plant and equipment.	165.090	Protective measures.
165.062	Line fills.	165.091	Safety program.
165.063	Central office equipment.		
165.064	Interconnection service standards.		
165.065	Emergency operation.		
165.066	Protection of utility facilities.		

Page 1 of 1

SAC: 330889 State: Wisconsin Hager Telecom Inc.

Form 481 Line No: 610 Description of Functionality in Emergency Situations

Hager Telecom Inc. pursuant to Wisconsin Public Service Commission rule "165.065 Emergency Operation" has:

- Established reasonable provisions to meet emergencies resulting from national security requirements, failures of lighting or power service, sudden and prolonged increases in traffic, illness or personnel, or from fire, storm, or similar emergencies. These provisions meet or exceed the rule requirement to provide:
  - Back up battery service in each central office.
  - Mobile power units that can be delivered on short notice and can be readily connected in offices without installed emergency power facilities.
- Informed employees as to procedures to be followed in the event of an emergency in order to prevent or mitigate interruption or impairment of telecommunications service, including rerouting of traffic around damaged facilities and the deployment of emergency power.

SAC: 330889 State: WI

Hager Telecom Inc

Form 481 Line No. 1010 Descriptive document for Voice Services Rate Comparability

Line 1010 – Description of Voice Services Rate Comparability: Provide a detailed description of how your pricing of fixed voice services is no more than two standard deviations above the applicable national average urban rate for voice service, as published annually by the Wireline Competition Bureau, as required in 47 C.F.R. § 54.313(a)(10).

On February 14, 2017, the Wireline Competition Bureau announced results of the Urban Rate Survey for Voice Services as part of FCC Public Notice DA 17-167. Referenced in this public notice are the results required to meet the rate comparability as noted:

"Based on the survey results, the reasonable comparability benchmark for voice services is \$49.51.3

<sup>3</sup> Id. at 17694, para. 84."

As required Hager Telecom Inc hereby certifies that its current fixed voice services for residential subscribers as defined in the USF/ICC Transformation Order is below \$49.51.

SAC: 330889 State: WI

Hager Telecom Inc.

Form 481 Line No. 1030 Descriptive document for Broadband Service Rate Comparability

\_\_\_\_\_

Line 1030 – Description of Broadband Service Rate Comparability: Provide a detailed description of how your pricing of a Broadband service meeting the Commission's Public Interest Obligations is no more than the applicable benchmark, as published annually by the Wireline Competition Bureau, pursuant to 47 C.F.R. § 54.313(a)(12).

On February 14, 2017, the Wireline Competition Bureau announced the results of the Urban Rate Survey for Broadband Service as part of FCC Public Notice DA 17-167. Referenced in this public notice are the results required to meet the rate comparability as noted:

Based on the survey results, the reasonable comparability benchmark calculations for broadband services can be calculated at http://www.fcc.gov/encyclopedia/urban-rate-survey-data.

As required Hager Telecom Inc. hereby certifies that it offers a Broadband service to residential subscribers at pricing that is no more than the applicable benchmark rate.

+

SAC: 330889 State: Wisconsin Hager Telecom Inc.

Form 481 Line No.: 1210 Terms and Conditions of Voice Telephony Lifeline

Hager Telecom Inc. offers Lifeline Service credit according to basic service requirements listed in Wisconsin Administrative Code 160.03 and 160.04:

### PSC 160.03 Essential telecommunications services.

- 1) "Essential telecommunications services" means all the following:
- (a) "911" means a service that permits a telecommunications user to use the three-digit code '911,' to access emergency services through a public safety answering point operated by a local government.
- (b) "Directory assistance" means a service that includes making available to customers, upon request, information contained in directory listings, such as customer address and telephone number.
- (c) "Dual tone multi-frequency" means a method of signaling that facilitates the transportation of signaling through the network, shortening call set-up time (a/k/a touch tone).
- (d) "Emergency services" includes services, such as 911 and enhanced 911, provided by local governments or other public safety organizations.
- (e) "Enhanced 911" means 911 service that includes the ability to provide automatic numbering information, which enables the public safety answering point to call back if the call is disconnected, and automatic location information, which permits emergency service providers to identify the geographic location of the calling party.
- (f) "Interexchange service" means the use of the loop, as well as that portion of the switch that is paid for by the end user, or the functional equivalent of these network elements in the case of a wireless provider, necessary to access an interexchange provider's network.
- (g) "Local usage" means an amount of exchange service, pre- scribed by the commission, provided free of charge to end users.
- (h) "Operator services" means any automatic or live assistance to a customer to

- arrange for billing or completion, or both, of a telephone call.
- (i) "Single-party service" means telecommunications service that permits users to have exclusive use of a landline subscriber loop or access line for each call placed, or, in the case of wireless providers, which use spectrum shared among users to provide service, a dedicated message path for the length of a user's particular transmission.
- (j) "Voice grade access" means functionality that enables a user of telecommunications service transmit voice communications, including signaling the network that the caller wishes to place a call, and to receive voice communications, including receiving a signal indicating there is an incoming call.
- 2) Each eligible telecommunications carrier shall make all essential telecommunications services available to all of its customers.
- 3) "Essential telecommunications services" means the service or functionalities listed in 47 CFE 54.101

### PSC 164.04 Call Limitation

- 1)Call limitations obligations
  - a. Except as provided in pars. b. and c., every local exchange service provider in the state shall offer call limitation capability for each of the following:
    - i. Long distance calls
    - ii. Pay-per-call service
    - iii. Collect toll calls
    - iv. Toll calls charged to a telephone credit card associated with the telephone number for which call limitation has been requested
    - v. Toll calls charged to a third telephone number for which call limitation has been requested.
  - b. Federal-only eligible telecommunications carriers are not required to offer any call limitation capabilities to customers who are not low income and need only offer blocking of outgoing toll calls to customers who are low income.
  - c. A local exchange service provider is not required to offer the blocking under par.
    - (a) 1., 3.,4., or 5., to a customer that has service that does not include a fee for

such calls that is in addition to the per month or per billing cycle price of service.

- 2) Charges. A local exchange service provider may not impose a charge for the cost of blocking pay-per-call services the first time a customer requests such blocking.
- 3) Emergency Service. A local exchange service provider may not impose a call limitation that prevents a customer from reaching the emergency service numbers appropriate for the customer's location.
- 4) Public Notification and Education. An eligible telecommunications carrier shall make reasonable efforts to inform its customers of the availability of and, where charge-free, eligibility requirements for, call limitation services. An eligible telecommunications carrier shall also make reasonable efforts to instruct customers requesting the service in the use of the service.
- Hager Telecom Inc.'s Lifeline service offerings are listed in Section 4, Sheets 2 7, of its Local Service Tariff (applicable sheets attached).
- The Local Service tariff is also on file with the Wisconsin Public Service Commission.
- All Lifeline subscribers must meet the terms and condition of Federal Lifeline Eligibility Rules.

Hager Telecom Inc. adheres to all Federal Lifeline eligibility rules and regulations as well as Wisconsin's Administrative Code, Chapter PSC 160.

### PSC 160.02 Definitions

- 6) "Low-income" means a household that meets one of the following criteria:
  - (a) Receives benefits from one or more of the following pro- grams:
    - Wisconsin works
    - Medical assistance
    - 3. Supplemental security income
    - 4. Food stamps

- 5. The low income household energy assistance program
- 6. Unless the provider is a federal-only ETC, Wisconsin homestead tax credit
- 7. BadgerCare Plus programs consistent with the income limits in subd. 11.
- 8. SeniorCare 1 and 2a
- 9. The national school lunch program's free lunch program
- 10. Temporary assistance for needy families, other than Wisconsin works
- As approved by the commission, other state or federally administered programs for households with income levels less than or equal to 200% of the poverty line as defined in 42 USC 9902.

### PSC 160.06 Eligibility for low-income programs.

- (1) LOW-INCOME ASSISTANCE ELIGIBILITY.
- (a) All ETCs shall verify an applicant's eligibility for low-income assistance programs by making timely queries of the applicable databases of the Wisconsin department of health services, the Wisconsin department of revenue, or other government agencies designated by the commission. An ETC shall verify an applicant's eligibility by finding the applicant to be any of the following:
  - 1. An active client of at least one of the programs listed in s. PSC 160.02 (21) (a).
  - 2. A member of the active client's household whose low income qualifies the client for benefits under at least one of the programs listed in s. PSC 160.02 (21) (a).
  - 3. At an income level that meets the conditions in s. PSC 160.02 (21) (b).
  - 4. At an income level that meets the conditions of any other federal low-income eligibility criteria.
- (b) Notwithstanding par. (a), an eligible telecommunications carrier shall verify an applicant as eligible for low-income assistance programs if the applicant qualifies for federal universal service fund support for eligible residents of tribal lands under 47 CFR 54.400 *et seq.*
- or (b), in addition to the house-holds considered low-income under the definition in s. PSC 160.02 (21), the ETC shall consider a household that receives benefits from federal public housing assistance (section 8) to be low-income.

- (2) ELIGIBILITY REVERIFICATION. An eligible telecommunications carrier shall re-verify eligibility on at least an annual basis for all customers receiving lifeline assistance. The eligible telecommunications carrier shall first attempt to re-verify eligibility by making timely queries of the applicable databases of the Wisconsin department of health services, the Wisconsin department of revenue, or other government agencies designated by the commission.
- (3) ELIGIBILITY INQUIRY. Eligible telecommunications carriers other than federal-only ETCs shall inquire of each customer regarding eligibility of that customer for low-income programs on each order for initial or moved residential service and, orally or in writing, in the first contact with the customer during a year concerning disconnection or payment arrangements.

### (4) QUERY AUTHORIZATION.

- (a) Customers shall complete and remit any reasonably required query authorization forms or forfeit eligibility.
- (b) Eligible telecommunications carriers shall obtain whatever customer authorization is required by the Wisconsin department of health services, the Wisconsin department of revenue, or other government agencies for the database queries necessary for eligibility verification. The commission may revoke the eligible tele- communications carrier designation and order the forfeiture of reimbursements if it accesses a customer's database information without that customer's authorization. The commission may also refer the eligible telecommunications carrier to the Wisconsin department of justice or other state agency for appropriate action.
- (5) APPLICANT REQUIREMENTS. Notwithstanding any other provision of this section, an applicant is only eligible for low- income assistance programs under this chapter if the applicant provides all of the information required under state and federal law.

### PSC 160.062 Lifeline program.

- (1) DEFINITIONS. (a) For purposes of subs. (2) to (7), "eligible telecommunications carrier" or "ETC" means only full and low-income ETCs, and does not include federal-only ETCs.
- (b) For purposes of this section, "line" means an access line, service to an activated wireless handset, or service to an internet connection used as a substitute for a traditional telecommunications connection.
- (c) For purposes of this section, "lifeline monthly rate" means the lifeline base rate under sub. (2) minus the lifeline adjustment under sub. (2g) or 2r).
  - (1g) APPLICABILITY. An eligible telecommunications carrier may apply the lifeline adjustment under sub. (2g) to any residential service that includes voice service, including bundles of voice and data services, and bundles that include optional calling features such as caller identification, call waiting, voice mail and three-way calling.
- (1r) ELIGIBILITY. (a) All eligible telecommunications carriers shall offer to all qualified low-income customers a lifeline adjustment to the customer's rate for either of the following:
  - Essential telecommunications service, whether stand- alone or as part of a service package.
  - 2. Internet access, if the customer demonstrates that, because of his or her disability other than cognitive impairment, certified under s. PSC 160.071 (1), the customer requires internet access that is adequate to support service that is substitutable for and comparable to essential telecommunications service.
  - (b) An ETC taking an application for the lifeline program shall do the following:
    - Unless the ETC uses a state or federal duplication prevention database, ask
      the applicant if he or she is currently receiving a lifeline adjustment on any
      other line.
    - 2. Require the applicant to certify that he or she is not currently receiving a lifeline adjustment on any other line or from any other provider.
    - 3. Only offer and apply the lifeline adjustment on one line.
    - 4. Ensure that any federal requirements about lifeline are met.

- (c) A customer may not request a lifeline adjustment on more than one line. An ETC shall not apply the lifeline adjustment unless the customer has certified under par.(b) that the customer is not receiving a lifeline adjustment on another line or from any other provider.
- (d) If an ETC becomes aware that a customer is receiving a lifeline adjustment on more than one line or from more than one provider, the ETC shall provide notice and take action under sub. to ensure that the customer receives a lifeline adjustment on only one line.
- 2) LIFELINE BASE RATE. The lifeline base rate is one of the following:
  - a. For an eligible telecommunications carrier offering local service on a stand-alone basis, the sum of:
  - 1. The in-state charges and fees for stand-alone single-party residential service with touch-tone, including, as applicable, all of the following:
    - a. Police and fire protection fee.
    - ь. State universal service fund assessment.
    - c. Remainder assessment.
    - d. Telecommunications utility trade practices assessment.
    - 2. Any 911 charges billed on the telephone bill.
    - 3. The federal subscriber line charge.
    - 4. The access recovery charge.
    - 5. The charge for 120 local calls, excluding extended community calling calls.
    - 6. Other charges as approved by the commission.
  - b. \$25, if the eligible telecommunications carrier does not offer local service on a stand-alone basis, and only offers it as part of a service package.
  - c. The commission may authorize a different lifeline base rate based on the particular facts and circumstances concerning an eligible telecommunications carrier's local service or internet access charges.
  - (2g) LIFELINE ADJUSTMENT. (a) Except as provided in par. (b) and sub. (2r):
  - 1. If the lifeline base rate is \$25 or less, the lifeline adjustment shall be \$10.
  - 2. If the lifeline base rate is greater than \$25, the lifeline adjustment shall be the lesser of the following:
    - a. The amount necessary to reduce the lifeline monthly rate to \$15.

- b. The maximum reimbursement available under 47 CFR 54.403, plus \$9.25.
- (b) If the ETC offers prepaid wireless service, the lifeline adjustment for that service shall be the greater of the following:
  - 1. The number of minutes that, when calculated using the lowest per minute rate the ETC offers to its prepaid wireless customers, equals or exceeds the value of the adjustment under par. that would otherwise apply.
  - 2. The number of minutes recognized by the federal communications commission as an acceptable compliance plan provision for that provider.
- (c) The adjustment under par. (a) 1. shall be increased automatically if both of the following occur:
  - 1. A federal communications commission order or a change in federal law causes an increase in a customer's lifeline base rate.
  - 2. The state reimbursement amount after the increased lifeline adjustment is not greater than it was before the federal communications commission order or change in federal law.
  - (d) Notwithstanding subs. (2g) and (2r), the lifeline adjustment for partial months of service shall follow the policy set by the federal universal service administration corporation or its successors.
- (2r) ADJUSTMENTS FOR RESIDENTS OF TRIBAL LANDS. (a) When a customer qualifies for federal universal service fund support for eligible residents of tribal lands under 47 CFR 54.400 *et seq.*:
  - 1. If the lifeline base rate under sub. (2) is \$25 or less, the life- line adjustment shall be \$10, plus whatever federal universal service fund support the customer qualifies for as an eligible resident of tribal lands.
  - If the lifeline base rate under sub. (2) is greater than \$25, the lifeline adjustment shall be the amount necessary to reduce the lifeline monthly rate to the level at which the adjustment results in a state reimbursement amount that is equal to what it would be under sub. (2g) (a) 2., plus whatever federal universal service fund support the customer qualifies for as an eligible resident of tribal lands.

- (b) The adjustment under par. (a) 1. shall be increased automatically if both of the following occur:
- 1. A federal communications commission order or a change in federal law causes an increase in a customer's lifeline base rate.
- 2. The state reimbursement amount after the increased adjustment is not greater than it was before the federal communications commission order or change in federal law.
- (3) SHOWING THE ADJUSTMENT. (a) Except as provided in par. (b), the eligible telecommunications carrier shall show the lifeline adjustment either as an adjustment to the full tariffed or standard rate on a customer's bill or as a special rate designation. Whenever possible, the eligible telecommunications carrier shall begin showing the lifeline adjustment or rate on an eligible customer's bill on the next bill date following the date of application for life- line assistance. If the ETC does not apply the lifeline adjustment or rate on the next bill date, when the ETC does apply the credit it shall be applied back to the date of application.
  - (b) If an eligible telecommunications carrier offers prepaid service and does not render a bill for that service, if it maintains a statement of account or account balance for a prepaid service customer the provisions of par. (a) apply to the statement of account or account balance. If the ETC does not maintain a statement of account or account balance, the ETC shall include information about adjustments and applicability dates in its terms of service.
- **PSC 160.063 Outreach for low-income assistance programs.** (1) Funding may be available to fund projects to increase participation of the eligible populations in the universal service fund low-income support programs.
- (2) Funding from the universal service fund for projects under sub. (1) may not exceed \$250,000 in one year. Funding shall be limited to not more than 6 projects with at least one project focused statewide and one project focused on the Milwaukee area, if feasible.
- (3) The commission may periodically review applications and grant funding, when funding is available, based on complete responses to a request for applications. An application may involve disbursement of support during multiple state fiscal years. All applications become public documents upon filing.
  - (3m) An application for funding under sub. (1) shall include all of the following:
  - (a) A description of the proposed project.

- (b) The name and a description of any project partners and the role of each partner.
- (c) A description of the proposed activities and an explanation of how those activities may increase participation of eligible populations in the universal service fund low-income support pro- grams.
- (d) A budget showing a breakdown of costs and how a grant under this section would be used.
  - (e) Any other information that the commission considers necessary.
- (4) The commission may authorize funding to conduct or con- tract for an evaluation of the effectiveness of this program in promoting enrollment in low-income programs and subscribership to telecommunications service. This evaluation shall be completed within 2 years of the date on which the commission grants the project funding. The cost of this evaluation shall not exceed \$25,000. This \$25,000 shall be included as part of the \$250,000 maximum total funding available under this section during the year in which the evaluation occurs.

PSC 160.08 Telecommunications customer assistance program. The commission may authorize individual telecommunications providers to establish telecommunications customer assistance programs that meet authorized goals and objectives for increasing or stabilizing subscription levels for non-optional, essential telecommunications service within its service territory or to address avoidance of disconnection or limitation of service to low-income households with payment problems. The customer assistance programs may allow a provider to not make available certain essential services, as defined in s. PSC 160.03 (2), in order to keep at least minimal telecommunications service to certain low-income households with payment problems. The commission shall determine on a case-by-case basis whether or not a telecommunications customer assistance pro- gram may receive universal service fund monies.

HAGER TELECOM, INC.  Name of Utility  Sheet No.	ALL 4 2 613
HAGER TELECOM, INC.  Name of Utility  Sheet No. Amendment No.  EXCHANGE ACCESS SERVICES  EXCHANGE RATES	4 2
EXCHANGE RATES	
A. BASIC LOCAL EXCHANGE RATES FOR BAY CITY AND HAGER CITY	
<u>Code</u> <u>Mor</u>	<u>ıthly</u>
1. Business Line, (One Party), each \$ 3	1.65
2. Business Line, (Multi-line), each 4	1.65
3. PBX Trunk, each 5	7.00
4. Residence Line, each <sup>1</sup>	2.75

NOTE1: The monthly rate, including Federal and State taxes, are not applicable for the second exchange line when the second exchange line is requested by hearing-impaired Customers to use Two Line Voice Carryover as defined in the Wis. Admin. Code PSC 160.02(12).

Issued	Applicable to bills rendered on and after	January 1, 2017
PSCW Authorization by order No		
Letter		

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PUBLIC SERVICE COMMISSION OF WISCON TELEPHONE RATE FILE	SIN	
HAGER TELECOM, INC.  Name of Utility	Exchange Section No. Sheet No. Amendment No.	ALL 4 2.1 612
EXCHANGE ACCESS SERVICES	1	
EXCHANGE RATES		
B. TEACH ASSESSMENT RECOVERY (Wisconsin State USF S	Surcharge)	
	Code	Monthly
1. Business Line, (One Party), each		\$ 0.75
2. Business Line, (Multi-line), each		0.75
3. PBX Trunk, each		0.75
4. Residence Line, each		0.75

Issued	Applicable to bills rendered on and after	r Dec 1, 2016
PSCW Authorization by order No		
Letter		

Form 10 F		CTED - FOR PUBLIC INSF	PECTION	
		PUBLIC SERVICE COMMISSION OF WISCO TELEPHONE RATE FILE	ONSIN	
2.	HAGER TEL Name of		Exchange Section No Sheet No Amendment No	ALL 4 2.2 605
		EXCHANGE ACCESS SERVIC	ES	
ЕУ	XTENDED AREA SE	RVICE (EAS)		
A.	DESCRIPTION			
	provided within a de	consisting of Network Access Lines and efined Local Service Area. The Local Sene(s) is the Exchange Area.		
В.	Telecommunication	ice (EAS) defines the Local Service Are s Service Customers in two different Ex e charges and/or rates for a local call.	a within which change Areas may	
C.	Extended Area Serv	rice (EAS) exists between the following	Exchanges:	
	From Exchange	To Exchanges		
	Hager City	Bay City, Ellsworth, Red Wing		
	Bay City	Hager City, Ellsworth, Red Wing		T
		_ Applicable to bills rendered on and afterA	oril 1, 2012	
	Letter			

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#### PUBLIC SERVICE COMMISSION OF WISCONSIN TELEPHONE RATE FILE

	Exchange	ALL
HAGER TELECOM, INC.	Section No.	4
Name of Utility	Sheet No.	3
	Amendment No.	54

## **EXCHANGE ACCESS SERVICES**

#### LIFELINE SERVICE

#### A. DESCRIPTION

- 1. Lifeline Service is a residence service offering that provides a discounted monthly rate to customers who qualify for low income assistance programs as defined in s. PSC 160.02(8), Wis Adm. Code.
- 2. Lifeline Service provides a monthly discount to eligible residence customers that have a network access line (including Extended Area Service), touch-tone service, 911 Service (billed on the customer's telephone bill), and the End User Common Line Charge (EUCL). If the customer has measured service, 120 local calls are provided. Extended Community Calling (ECC) Service is not included in Lifeline Service.
- 3. Lifeline Service monthly rates for residence customers are established according to s. PSC 160.062(1), (2) and (3), Wis Adm. Code.

# B. REGULATIONS

- Lifeline Service is only available for residence customers with a single line network access line.
- Lifeline Service is not available to customers who are dependents for federal income tax purposes as defined in 26 USC 152 (1986), unless the customer is more than 60 years old.
- Lifeline Service customers must complete and remit any required query authorization forms requested by the Company or forfeit eligibility for Lifeline Service.

Issued	Applicable to bills rendered on and after	12-1-98	
PSCW Authorization by order No.			
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	Exchange	ALI
HAGER TELECOM, INC.	Section No.	4
Name of Utility	Sheet No.	4
	Amendment No.	54
EXCHANGE ACCESS	SERVICES	

# LIFELINE SERVICE (Cont'd)

- B. REGULATIONS (Cont'd)
  - 4. Eligibility for Lifeline Service must be verified by the Company by finding the Social Security Number and name of the listed customer in active records of the Department of Workforce Development or the Wisconsin Department of Revenue.
  - 5. Reconfirmation of Eligibility for Lifeline Service
    - Reconfirmation of eligibility for Lifeline Service will be done at a. least once each year.
    - Ъ. If a customer cannot reconfirm eligibility for Lifeline Service, eligibility will continue until the next bill date following failure to meet the eligibility requirements.
    - When the Low Income Household Energy Assistance Program is C. one of the customer's qualifying low income assistance programs, the eligibility for Lifeline Service shall continue until the bill date in the next December following the close of the heating season. At that time, if eligibility cannot be re-verified by the Company Lifeline Service will be removed from the customers bill.
    - When the Wisconsin Homestead Tax Credit is one of the d. customer's qualifying low income assistance programs, the eligibility for Lifeline Service shall continue until the bill date in the next June following the end of the tax year. At that time, if eligibility cannot be re-verified by the Company Lifeline Service will be removed from the customers bill.

Issued	Applicable to bills rendered on and after	12-1-98
PSCW Authorization by order No		
Letter _		

orm 10 Rate			
		PUBLIC SERVICE COMMISSION OF WISCONSIN TELEPHONE RATE FILE	
	L	HAGER TELECOM, INC. Exchange ALI	L
		Name of Utility Sheet No. 5 Amendment No. 6	4
		EXCHANGE ACCESS SERVICES	
LIFE	ELINE S	SERVICE (Cont'd)	
В.		GULATIONS (Cont'd)	
	5.	Reconfirmation of Eligibility for Lifeline Service (Cont'd)	
		e. Eligibility confirmation through receipt of the Wisconsin Homestead Tax Credit will not become effective until the date set by the Commission upon its acknowledgment that an acceptable data base query process is in place.	
	6.	Lifeline Service will appear as a credit or rate reduction on the customer's bill on the next bill date following the date the customer applied for Lifeline Service. When the customer's eligibility precedes the previous bill, credit will also be given on one month's prior bill.	

ssued 12-14-01		Applicable to bills rendered on and after	1-1-02	
PSCW Autho	rization by order No			
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Form 10 Rate				1
		PUBLIC SERVICE COMMISSION O TELEPHONE RATE FIL		
	I	HAGER TELECOM, INC.	Exchange _ Section No	
		Name of Utility	Sheet No	6 4
		EXCHANGE ACCESS SE	ERVICES	
LIFE	ELINE	SERVICE (Cont'd)		
В.	REC	GULATIONS (Cont'd)		
	7.	A Lifeline Service customer cannot be of toll charges.	disconnected for the non-pa	ayment (T
	8.	If Call Blocking Service is available an Blocking Service, a Service Deposit cal Lifeline Service. If Call Blocking Service may require a Service Deposit to estable	nnot be collected to establistice is not available, the Con	sh
		-01Applicable to bills rendered on and after	1-1-02	
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Form 10 Rate

# PUBLIC SERVICE COMMISSION OF WISCONSIN TELEPHONE RATE FILE

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Name of Utility

Exchange	ALL
Section No.	4
Sheet No.	7
Amendment No.	613

## **EXCHANGE ACCESS SERVICES**

# LIFELINE SERVICE (Cont'd)

#### C. RATES AND CHARGES

The applicable monthly rate for Lifeline Service is determined by the sum of the rates for the services specified in 1, following and applying a credit based on the sum of the credits as specified in 2, following.

### 1. Lifeline Service

Residence Network Access Line (including EAS) at the rate specified in this section of the Tariff.

Touch Tone Service at the rate specified in Section 5 of this Tariff.

911 Service (if billed on the Customer's telephone number).

End User Common Line (EUCL) Charge.

## 2. Lifeline Service Credits

End User Common Line (EUCL) Charge as specified in the NECA Tariff.

Federal Lifeline support credit as specified by the Federal Communications Commission (FCC) for Universal Service Support for Low-Income Consumers.

State Lifeline support credit as specified by the Public Service Commission of Wisconsin in Wis. Admin. Code PSC 160.062.

# 3. Lifeline Service Monthly Credit

The Lifeline Service monthly credit is as calculated and applied consistent with Wis. Admin. Code PSC 160.062.

Issued	Applicable to bills rendered on and afte	r January 1, 2017
PSCW Authorization by order No		
Letter		

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SAC: 330889 State: WI

Hager Telecom Inc.

Response to Line 3010 – Milestone Certification (47 CFR §54.313(f)(1)(i))

Hager Telecom Inc. hereby certifies that throughout 2016, it took reasonable steps to provide upon reasonable request broadband service at actual speeds of at least 4 Mbps downstream/1 Mbps upstream, and currently, it is taking reasonable steps to provide upon reasonable request actual speeds of at least 10 Mbps downstream/1 Mbps upstream broadband service at with latency suitable for real-time applications, including Voice over Internet Protocol, and usage capacity that is reasonably comparable to comparable offerings in urban areas as determined in an annual survey, and that requests for such service are met within a reasonable amount of time.

SAC: 330889 State: WI

Hager Telecom Inc.

Form 481 Line No. 3026 - Rate of Return Financial Data

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